

Updated: 08/01/2023

Sworn Financial Statements and Certification of Revenues \$75,000 or Less

Entity Name: Washington Parish Coron	er				
Address: 803 Pearl Street, Franklinton,	LA 7	0438			
Telephone: 985-735-8111	En	nail: drcas	ama365@gmail.d	com	
This annual sworn financial statement is re the end of the entity's fiscal year by sending 3986, or mailing to Louisiana Legislative Rouge, LA 70804-9397.	a pdf	copy by e	nail to <u>ereports@li</u>	a.la.gov,	faxing to 225-339-
	AJ	FFIDAVI	г		
Personally came and appeared before the un	ndersi	gned autho	ority, Rogelio A C	asama	(officer's
name), who, duly sworn, deposes and says material respects, the financial position of 2/28/25 (entity's year-en	that th	ne financia	statements herewi	th given p	resent fairly, in all (entity's name) as
accordance with the basis of accounting de- entity has maintained a system of internal claws and regulations; and that the enti- follows:	escribe contro	ed within to	he accompanying sufficient to safeg	financial s uard asset	s and comply with
Complete if Applicable: In addition,			(offic	er's name), who duly sworn,
deposes, and says that			(entity's nar	me) receiv	ed \$75,000 or less
in revenues and other sources for the year en	ided_		(entity)	s year-end), and accordingly,
Is not required to have an audit for the prevone of	iously	y mentione	d fiscal year. Washington Pa	arish Core	oner
OFFICER'S SIGNATURE			OFFICER'S TIT	TLE	
Sworn to and subscribed before me, this	2	_day of _	June	, 20_	25
NOTART TOBER SIGNATURE NO. S. W. S. W.	TARY PO TATE O	E M. GOODE UBLIC # 06570 F LOUISIANA GTON PARISH on Expires At De			

Sworn Financial Statement

Entity Name: Washington Parish Coroner	Fiscal	Year End: _	2/28/25
Statement of Receipts and Disbursements	Conoral	Othor	Statement A
	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
Cremations			12,650
2. CECs			28,800
3.			\$ 0.00
4.			\$ 0.00
5.			\$ 0.00
6. Total receipts (add lines 1 - 5)	\$ 0.00	\$ 0.00	41,450
DISBURSEMENTS (Provide Brief Description): 7. Phone/Internet 8.			3250.00
Rent			6400.00
9.			\$ 0.00
10.			\$ 0.00
11.			\$ 0.00
12.			
13. Total Disbursements (add lines 7 - 12)	\$ 0.00	\$ 0.00	\$ 0.00 9650.00
14. Change in fund balance (Lines 6 minus 13)	\$ 0.00	\$ 0.00	31,800
			¢ 0 00
15. Fund Balance at beginning of year			\$ 0.00

NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

Identify the Basis of Accounting, if not using Cash-Basis:

Sworn Financial Statement

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Fiscal Year End: 2/28/25

Balance Sheet

Statement B

	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
Cash and cash equivalents			\$ 0.00
2. Investments (fair value)			150000000000000000000000000000000000000
Office furnishings (Cost of desks, etc)		-	\$ 0.00
			\$ 0.00
Equipment (Cost of fax machine, etc)			\$ 0.00
5. Other (brief description)			\$ 0.00
6. Total Assets (add lines 1 - 5)	\$ 0.00	\$ 0.00	\$ 0.00
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (brief description):			\$ 0.00
			8
8.			\$ 0.00
7. Liabilities (brief description): 8. 9.			\$ 0.00
9.	\$ 0.00	\$ 0.00	\$ 0.00 \$ 0.00 \$ 0.00
8. 9. 10.	\$ 0.00	\$ 0.00	\$ 0.00 \$ 0.00 \$ 0.00
9. 10. 11. Total Liabilities (add lines 7 - 10)	La managaria		\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name, Title	Rogelio A Casama,	Washington Parish Coroner	

Purpose	Dollar Amount
1. Salary	22,812
2. Benefits-insurance	
3. Benefits-retirement	
4. Benefits-other (describe)	
5. Benefits-other (describe)	
6. Benefits-other (describe)	
7. Car allowance	
8. Vehicle provided by government (if reported on your W-2)	
9. Per diem	
10. Reimbursements	
11. Travel	
12. Registration fees	
13. Conference travel	
14. Housing	
15. Unvouchered expenses (example: travel advances, etc.)	
16. Special meals	
17. Other	
18. TOTAL (enter total of line 1-17)	22,812

Please check here if the Agency Head does not receive any compensation, benefits, and other payments. (Act 462 of the 2015 Legislative Session allows nongovernmental entities or not-for-profit (quasi-public) entities to report on the Act 706 schedule only those payments to the agency head that are derived from the public funds.)

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